

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000498

Entity Name: LEXFORD PARTNERS, L.L.C.

FILED
Apr 10, 2006
Secretary of State

Current Principal Place of Business:

C/O LEGAL DEPT.
6954 AMERICANA PARKWAY
REYNOLDSBURG, OH 43068

New Principal Place of Business:

C/O BARBARA SHUMAN
TWO NORTH RIVERSIDE PLAZA
CHICAGO, IL 60606

Current Mailing Address:

C/O LEGAL DEPT.
6954 AMERICANA PARKWAY
REYNOLDSBURG, OH 43068

New Mailing Address:

C/O BARBARA SHUMAN
TWO NORTH RIVERSIDE PLAZA
CHICAGO, IL 60606

FEI Number: 31-1595945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EQUITY RESIDENTIAL P, ROPERTIES TRUS T
Address: TWO NORTH RIVERSIDE PLAZA, SUITE 400
City-St-Zip: CHICAGO, IL 60606

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ERP OPERATING LIMITE, D PARTNERSHIP
Address: TWO NORTH RIVERSIDE PLAZA, SUITE 400
City-St-Zip: CHICAGO, IL 60606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BARBARA SHUMAN

MGRM

04/10/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date